



## SIGN APPLICATION

Date: \_\_\_\_\_

Application Fee: \_\_\_\_\_

Address Of Proposed Sign: \_\_\_\_\_ Parcel Number: \_\_\_\_\_

The undersigned applies for sign approval for the following use. Said approval to be issued on the basis of the information contained within this application & appropriate attachments. The applicant hereby certifies that all information & attachments to this application are true and correct. In addition to the information requested on this form the applicant is required to: **SUBMIT PLANS SHOWING THE ACTUAL DIMENSIONS AND SHAPE OF THE LOT; EXACT SIZES AND LOCATIONS OF EXISTING BUILDINGS ON SUBJECT LOT; THE PRECISE LOCATION WITH DISTANCES OF THE PROPOSED SIGN; AND THE DESIGN AND DIMENSIONS OF THE SIGN.**

Property Owner's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person's Email \_\_\_\_\_

Contractor/Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person's Email \_\_\_\_\_

Required Dimensions/Information:		Proposed Use	
1. Job Estimate	_____	New Sign Reface	_____
2. Building Frontage	_____		Type of Sign
3. Site Frontage	_____	Building Sign Ground Sign Awning/Marquee Sign Temporary Sign (must be renewed every 30 days; maximum 90 days/year)	_____
4. Existing Use	_____		_____
5. Sign Dimensions	Ht _____ Length _____		_____

Special Instructions, Comments, Contingencies: \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY:** Date of Action on Application \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_

If denied, reason for denial \_\_\_\_\_

Zoning Inspector \_\_\_\_\_ Date \_\_\_\_\_

*Approvals are subject to all applicable building codes. Permit(s) to be pulled through the Stark Co Building Dept.*